

**MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

107049437

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
1						
2						
3		2		2		1
4	1		1		1	
5		1		1		1
6		2		2		1
7		2		2		1
8		1		1		1
9		0		0		1
10	1		1		1	
11		1		1		1
12		1		1		1
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TOTAL IND.	3	1		1	3	1
TOTAL DER.	12				9	
TOTAL CLAIMS	15				12	

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	IND.	DER.	IND.	DER.	IND.	DER.
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100						
TOTAL IND.						
TOTAL DER.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS